

NURSING IN MISSION STATIONS

Two years ago on November 1st, All Saints' Day, the news of the Lien Chow martyrdom reached this country. We are able now, through the courtesy of *Woman's Work*, a Presbyterian missionary magazine, to present a picture of the memorial tablet erected to the memory of these martyrs and placed last spring in the assembly room of the Presbyterian building, 156 Fifth Avenue, New York.

Eleanor Chesnut, whose name stands first on the tablet, was a nurse as well as a doctor; her life and death were so heroic that all nurses should cherish the memory of one who nobly represented their profession.

POSSIBILITIES OF COÖPERATION IN REGARD TO TRAINING OF EFFICIENT NURSES

Paper read by Mrs. (Dr.) Rowley at a meeting of the Central China Medical Missionary Association at Hankow, 1907.

"One of the things that struck me most when I first came to China, was the amount of time that it seemed quite necessary for missionaries to spend in nursing the sick ones among their own circle and outside it, and the great need for really trained help in times of illness. I am not a certificated nurse, and I therefore hardly feel that I am the best one to write on this subject, but I did have some nursing training before I began my medical work and this has been very valuable to me since. With the aid of this bit of training I soon began to try to get things in our hospital into something like ordinary hospital routine. The more I came into contact with the Chinese girls who worked in the hospital the more I could see no reason why they should not become really efficient nurses, and able to supply the need which seemed to me so real and urgent among foreigners as well as Chinese.

But there were many difficulties to contend with in getting the girls to fall into line with the discipline and rigorous life of training. First came the fact that other people among the Chinese had no respect for the calling of a nurse, but looked upon it as menial in the extreme, and the work quite beneath the dignity of a decently brought-up girl. The girls themselves would say, "What are we, we are nothing, we do not have education, we shall never be doctors," and to be a doctor seemed to be the only thing worth being in connection with medical work. If they went out with me to a well-to-do patient's house, the people treated

them like slaves, left them standing, brought them no tea and generally neglected them. This had to be remedied even at the risk of spoiling the girls. A skirt for outside use was provided, my tea was passed on to the nurse, and I did not sit till she also was asked to do so, and bye and bye it came to be understood.

In hospital by dint of regular teaching the most menial and objectionable parts of the work were found to have their interest and great importance. When inspection of excreta was found to be so vital a matter as to make it impossible to trust it in the hands of an ignorant "pópó" * a matter needing care and brains, and really connected with the patient's well-being, there was no more trouble getting the girls to do this kind of work.

Soon regular night-duty was established and regular off-duty times arranged for, and at other times the girls were found always in the wards and at their posts. Gradually a spirit of proper pride in their own work and their own hospital has sprung up; and there is no doubt that now the dignity and desirability of their profession is very much in their minds, and the girls are usually very eager to learn, do or see anything which will make them more efficient in their work.

Till quite recently there has been some difficulty in getting suitable girls for training, but latterly we have many girls with their names down a year or two in advance, anxious to come. Our requirements hitherto for girls wishing to enter the hospital have been simply that they must be not less than seventeen years of age and must be able to read and write. Gradually we have been able to get better educated girls. Hitherto the training we have required has been three years, the girls coming first for three months' probation before signing the three years' agreement. During these three years the girls receive just enough to clothe themselves, beginning at fifty cents a month for the trial time, then one dollar, one dollar and a half and two dollars a month for the three succeeding years. After three years they may stay on at a salary of six dollars, rising gradually to ten dollars a month in addition to food.

During their course, in order to receive a certificate, an examination in general nursing in two parts—written and practical—must be passed. It can be taken at the end of the first year. A separate certificate is given for midwifery and teaching in this subject, unlike that of nurses in the homeland, includes operative work. The present state of things in China seems to demand this. We have several times received

* Pópó—a term for an old woman who does menial work.

nurses for shorter training for other hospitals in which case all expenses are paid and a fee charged for teaching.

During the last year our nurses have brought in four hundred and fifty dollars, gold, for caring for cases outside the hospital, and have several times been called to wealthy Chinese homes.

The main object of this discussion is a practical one; viz., to devise means for coöperation in order to increase and improve our nursing staff in Central China. I should like to lay before you for discussion the whole question.

1. That examination both in nursing and midwifery should be conducted by a central examining board, on which shall be representatives from several missions, thus giving more than local value to the certificate. Certificates should in each case be given only at the end of the training and signed in addition to the examiner's signatures by the matron of the particular hospital to which the candidate belongs, as a guarantee of general satisfaction.

2. That a certain term of training should be agreed upon and selected for all hospitals sending candidates for these central examinations, so that any man or woman receiving the certificate may be known to have had a suitable amount of practical work in addition to the study and technical classes necessary for passing the examination.

3. That the examinations shall be held in the spring and autumn of each year and that candidates who fail may have another opportunity six months later. In the case of women who may have to be married and go away to distant places, this may mean a great deal.

4. That examination should be on fixed subjects, leaving the books used to the option of those who teach.

5. That pupils presenting themselves for examination in midwifery should be able to produce proof of having taken part in the conduct of at least twenty cases and of having had teaching on the phantom."

[The above article is a revelation. We think of China as a place where trained nursing is unknown, and we find that already some of our own most advanced problems are being considered there,—a uniform curriculum and a central examining board.]

Miss Maddock, of Wuhu, China, to whom this department has so far been indebted for most of its material, sends us a thin Chinese book, with large Chinese characters on the back cover, which is, of course, the front cover. The first title page is in Chinese, also, but the second is in English and reads *Manual of Nursing* compiled by the Central China Branch of the China Medical Missionary Association. Shanghai: Printed at the American Presbyterian Mission Press, 1905.

The table of contents, printed both in English and Chinese, indicates that the nine different chapters are prepared by nine physicians, that on obstetrics by a woman. The subjects treated are: Introduction; Elementary Anatomy and Physiology; Surgical Nursing (two chapters); General Nursing; Nursing in Medical Cases; Obstetrical Nursing; Nursing in Children's Diseases; Glossary.

The chapters are printed in Chinese, but the pages have English headings, from which one can follow the matters treated. It seems to be arranged in a very practical, helpful way. For instance, the chapters on surgical nursing begin, Importance of cleanliness, bacteria the cause of disease, media of infection, how to purify the air of the ward, care required for the nurses' clothes and hands, how to make the patient antiseptic, etc. The glossary gives the Chinese characters selected to represent the different medical terms used, for of course the medical phrases in common use here have no exact counterpart in the Chinese and characters must be invented or adapted for use.

From *The Nursing Times*: In an article entitled Among the Nazarines, Miss Johncock says: "All food and cooking had to be prepared in the room with the patients, who would lie with their nostrils plugged with raw onions or some green leaves with a very strong smell, to prevent them from smelling the cooking, which was considered very bad for a wound. * * *

"At times my thoughts turn longingly to the neat, clean, orderly wards at home, and I long to tread the polished floors and breathe the clean air once more; but the voice of a little child calls, begging a drink of water. I put the feeder, which its tiny hands grasp as they would a prize, to the parched lips, while for a few brief moments the burning thirst is quenched; then a little hand seeks mine in gratitude and kissing it, raises it to its head, and in a quaint, old-fashioned way prays that my days may be long in the land. My heart replies that if this be so they shall all be spent for those who so much need care and comfort in this land."

